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US Case 4-22804

DECLARATION AND POWER OF ATTORNEY FOR U.S. PATENT APPLICATIONS

	Original	□ Supplement	al 🗆	Substitute	■ PCT	
As a	a below name	d inventor, I hereby	declare that:			
Му	residence, po	st office address an	d citizenship a	are as stated belo	w next to my nan	ne.
orig	inal, first and	e original, first and joint inventor (if mo and for which a pate	re than one r	ame is listed belo	ow) of the subjec	
Rea	ctive dyes, a p	rocess for their pre	paration and th	neir use /		
whic	ch is describe	d and claimed in:				
	the attache	ed specification.				
□ _. .	the specifi	cation in U.S. Applic , and _y/month/year)	cation No. as amended	on (day/mont	(if applic	cable).
×	filed	cation in Internation 24/11/2003 //month/year)	al Application	No. PCT/EP0	3/50878 -	
	assigned l	J.S. Application No.		(if application	able), and as am	ended
	□ under	PCT Article 19 on	/ day //w a mal	(if applica	able)	
	□ under	PCT Article 34 on	(day/mont	(if application	able)	
	□ and fu	irther amended on	(day/mont	(if application)	able)	
		at I have reviewed uding the claims, as				
		e duty to disclose a is application as de			me to be materi	al to the
app des hav PC	olication(s) for ignating at le le also identifi Tinternationa tes of Amerio	foreign priority ber patent or inventor ast one country othed below any foreign application(s) decarelating to this sich priority is claimed	's certificate of ner than the Uniter than the Uniter than the nerthan application (signating at subject matte	or of any PCT int Inited States of A s) for patent or inv least one country	ternational applic america listed be ventor's certificato other than the	cation(s) low and e or any United

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COUNTRY/REGION (OR PCT)	APPLICATION No.		FILING (day/mont			PRIORITY CLAIMED		MED	
EP (designating all states)	02 406 046.9		02.12.	2002	×]	Yes		No
· a]	Yes		No
]	Yes		No
]	Yes		No
						3	Yes		No
I hereby claim the beneapplication(s) listed be		§ 1-	19 (e) of any	/ Uni	ted Stat	es	provis	ional	
APPLICATION NO.	CATION NO. FILING DATE (day/month/year)								
I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) or PCT international application(s) designating the United States listed below and, insofar as the application discloses and claims subject matter in addition to that disclosed in the prior copending application, I acknowledge the duty to disclose all information known by me to be material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:									
U.S. APPLICATION No.	FILING DATE (day/month/year)				STATU	S			
			Patented		Pendin	g		Aban	doned
			Patented		Pendin	g		Aban	doned
			Patented		Pendin	g		Aban	doned
			Patented		Pendin	g		Aban	doned
			Patented		Pendin	g		Aban	doned
PCT APPLICATION No. (designating the U.S.)	INTERNATIONAL FILING DATE (day/month/year)	U.S. APPLICATION STATUS No. (if any)		ATUS	3				
							Pate	ented	
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							Aba	ndone	d

CSC

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I hereby appoint the following attorneys and agents, associated with Customer No. 000324) each of them with full power of substitution, revocation and appointment of associates, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

JoAnn L. Villamizar (Reg. No. 30,598), Kevin T. Mansfield (Reg. No. 31,635), Michele A. Kovaleski (Reg. No. 37,865), Tyler A. Stevenson (Reg. No. 46,388) and Shiela A. Loggins (Reg. No. 56,221).

Address all correspondence associated with Customer No. 000324 to Ciba Specialty Chemicals Corporation, Patent Department, 540 White Plains Road, P.O. Box 2005, Tarrytown, NY 10591-9005.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole

first joint inventor

Inventor's signature

Residence Belchenstrasse 17

79585 Steinen_

Germany DEX

Jürgen SCHMIEDI

Citizenship

German ,

Post Office Address

same as above

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2-0	Full name of second joint inventor, if any	Damien SCHOEHN		
	Inventor's signature •		Date _	20.04.05 (day/month/year)
	Residence	Rue des Sorbiers 7 68190 Ensisheim France FRX		
	Citizenship	French		
	Post Office Address	same as above		
3-0	Full name of third joint inventor, if any	Klaus KOCH		
	Inventor's signature	Man Holl	Date .	al. Du. 2003 (day/month/year)
	Residence	Tramstrasse 35n 4132 <u>Muttenz</u> Switzerland C++ X		
	Citizenship	German		
	Post Office Address	same as above		
	Full name of fourth joint inventor, if any			
	Inventor's signature		Date	(day/month/year)
	Residence			, ,
	Citizenship			
	Post Office Address	same as above		
	1 OUL OTHER Additions			